

2823/11



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/032,564
Filing Date	January 2, 2002
First Named Inventor	Yasutoshi OKUNO et al.
Group Art Unit	2823
Examiner Name	Michelle Estrada
Attorney Docket Number	740819-725

ENCLOSURES (check all that apply)

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form
<input checked="" type="checkbox"/> Fee Attached
<input checked="" type="checkbox"/> Amendment / Reply
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input checked="" type="checkbox"/> Extension of Time Request
<input type="checkbox"/> Express Abandonment Request
<input type="checkbox"/> Information Disclosure Statement
<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers
<i>(for an Application)</i>
<input type="checkbox"/> Drawing(s)
<input type="checkbox"/> Declaration and Power of Attorney
<input type="checkbox"/> Licensing-related Papers
<input type="checkbox"/> Petition
<input type="checkbox"/> Petition to Convert to a Provisional Application
<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address
<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Request for Refund
<input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Proprietary Information
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<input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures
<input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt
<input type="checkbox"/> Other Enclosure(s) <i>(Please identify below):</i>

2823/11
MAIL ROOM 4 |
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Remarks

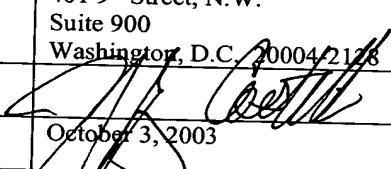
The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	<u>Jeffrey L. Costellia, Reg. No. 35,483</u> Nixon Peabody LLP 401 9 th Street, N.W. Suite 900 Washington, D.C. 20004-2128	
Signature		
Date	October 3, 2003	

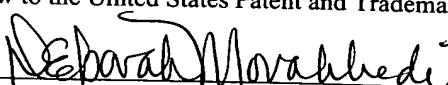
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October 3, 2003

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Deborah Movahhedi
Typed or printed name

FEE TRANSMITTAL FOR FY 2003

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27
TOTAL AMOUNT OF PAYMENT (\$950)

Complete if Known	
Application Number	10/032,564
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Examiner Name	Michelle Estrada
Art Unit	2823
Attorney Docket No.	740819-725

OCT 07 2003
U.S. PATENT & TRADEMARK OFFICE

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Other None

Deposit Account:

Deposit Account Number

19-2380 [740819-725]

Deposit Account Name

Nixon Peabody LLP

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 Charge any additional fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					(\$ 0)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	-20** =	Extra Claims	Fee from below	Fee Paid
Independent Claims	-3** =			
Multiple Dependent	X			

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 86	2201 43	Independent claims in excess of 3
1203 290	2203 145	Multiple dependent claim, if not paid
1204 86	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$ 0)		

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description		
Fee Code	Fee Code	Fee (\$)	Fee (\$)	
1051	2051	130	65	Surcharge - late filing fee or oath
1052	2052	50	25	Surcharge - late provisional filing fee or cover sheet
1053	1053	130	130	Non-English specification
1812	1812	2,520	2,520	For filing a request for ex parte reexamination
1804	1804	920*	920*	Requesting publication of SIR prior to Examiner action
1805	1805	1,840*	1,840*	Requesting publication of SIR after Examiner action
1251	2251	110	55	Extension for reply within first month
1252	2252	420	210	Extension for reply within second month
1253	2253	950	475	Extension for reply within third month
1254	2254	1,480	740	Extension for reply within fourth month
1255	2255	2,010	1,005	Extension for reply within fifth month
1401	2401	330	165	Notice of Appeal
1402	2402	330	165	Filing a brief in support of an appeal
1403	2403	290	145	Request for oral hearing
1451	1,510	1,510	1,510	Petition to institute a public use proceeding
1452	2452	110	55	Petition to revive - unavoidable
1453	2453	1,330	665	Petition to revive - unintentional
1501	2501	1,330	665	Utility issue fee (or reissue)
1502	2502	480	240	Design issue fee
1503	2503	640	320	Plant issue fee
1460	1460	130	130	Petitions to the Commissioner
1807	1807	50	50	Processing fee under 37 CFR 1.17(q)
1806	1806	180	180	Submission of Information Disclosure Stmt
8021	8021	40	40	Recording each patent assignment per property (times number of properties)
1809	2809	770	385	Filing a submission after final rejection (37 CFR 1.129(a))
1810	2810	770	385	For each additional invention to be examined (37 CFR 1.129(b))
1801	2801	770	385	Request for Continued Examination (RCE)
1802	1802	900	900	Request for expedited examination of a design application
Other fee (specify) _____				

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$950.00)

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October 3, 2003

Date

Deborah Movahhedi
Signature
Deborah Movahhedi

Typed or printed name

SUBMITTED BY

Name (Print/Type)	Jeffrey L. Costella	Registration No. (Attorney/Agent)	35,483	Complete (if applicable)
Signature	<i>Jeffrey L. Costella</i>	Telephone	(202) 585-8000	Date
				October 3, 2003

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